Weatherization Assistance Program Job Cost and Building Work Report (BWR)

Agency: _____

Contractor/Crew
Supervisor: _____   Applicant's Name: _____

Address: _____   Address: _____

_____

Phone: _____   Phone: _____

WILL CONTRACTOR RENT AGENCY EQUIPMENT FOR THIS JOB?   ☐ YES   ☐ NO

RETRO TYPE: ☐ SITE BUILT   ☐ MOBILE HOME   ☐ OWNER   ☐ RENTER   Funding Source

	# of Units	Unit Cost	Materials	Labor	DOE WAP	LIHEAP WAP	Other:	Measure Sub-total
Incidental Repair Measures								
Material Sub-total								
Labor Sub-total								
Air Sealing								
Material Sub-total								
Labor Sub-total								
Attic / Ceiling Insulation								
Material Sub-total								
Labor Sub-total								

	# of Units	Unit Cost	Materials	Labor	DOE WAP	LIHEAP WAP	Other:	Measure Sub-total
Duct Sealing and Insulation								
Material Sub-total								
Labor Sub-total								
Wall Insulation								
Material Sub-total								
Labor Sub-total								
Floor Insulation								
Material Sub-total								
Labor Sub-total								
Base Load & GHW								
Refrigerator								
Domestic Hot Water								
CFL retrofits, air filters, low-flow showerheads, faucet aerators, hot water tank blanket, pipe insulation								
Material Sub-total								
Labor Sub-total								

		# of Units	Unit Cost	Materials	Labor	DOE WAP	LIHEAP WAP	Other:	Measure Sub-total
HVAC									
	Heating/Cooling								
	Repair								
	Replacement								
	Thermostat								
	Material Sub-total								
	Labor Sub-total								
Health & Safety									
	Smoke Alarm								
	CO Alarm								
	ASHRAE 62.2								
	Material Sub-total								
	Labor Sub-total								
Other Misc. Expenses									
	Material Sub-total								
	Labor Sub-total								

Grand Totals			DOE	LIHEAP	Other	
		Material				
		Labor				
The work shown above was inspected for compliance and completion.	Sub-Total Material and Labor					
		Total Job Cost				
AGENCY INSPECTOR:	DATE:	**(all funding Material and labor)**				

A COPY OF ALL BWR PAGES MUST BE PLACED IN THE CLIENT FILE.

4/28/15